

VOTER REGISTRATION APPLICATION

TO REGISTER: All items, except where noted, must be completed to register to vote.

Under federal and/or state law, all electors must present ID when voting.

1. Are you a citizen of the United States of America? ☐ Yes ☐ No *
2. Will you be 18 years of age on or before election day? ☐ Yes ☐ No *

***Note:** If you checked "no" in response to either of these questions, do not complete this form.

3. **DRIVER'S LICENSE #** _____

(If you do not have a driver's license number, list the

LAST FOUR DIGITS OF SOCIAL SECURITY # _____

(Under federal law you are required to provide one of the above, unless you do not have either. If you have neither, provide a copy of ID specified under 13-2-110, MCA.)

4. Email Address (optional) _____

5. **PRINT FORMER NAME** _____

6. **PLACE LAST REGISTERED** _____
CITY COUNTY STATE

For office use only ↓

	Date	Pct	Ward	School	House	Senate	Fire	

7. **NAME** _____
Last First Middle

8. **ADDRESS WHERE YOU LIVE***

*Precinct is determined by address where you live.

(Street, City, Zip or Sec., Twp. & Range)

9. **MAILING ADDRESS** (If different than #8)

10. **TELEPHONE NUMBER**

11. **DATE OF BIRTH** ____/____/____
Month Day Year

12. **VOTER DECLARATION** (read and sign below)

I swear/affirm that: a) I am a US citizen; b) I'll be at least 18 years old on or before the next election; c) I'll have lived in this county for at least 30 days before the next election; d) I'm neither in a penal institution for a felony conviction nor found of unsound mind by a court; e) If I don't now meet these qualifications, I will by the next election; and f) I've provided true information, to the best of my knowledge, under penalty of perjury. If I've given false information, I may be subject to a fine or imprisonment or both under Federal or State laws.

SIGNATURE: _____ **DATE** _____

Please print this form, fill it out, **SIGN** it, and mail to:

Ravalli County Election Office
215 South 4th Street, Suite C
Hamilton, MT 59840